

DEPARTMENT OF SOCIAL SERVICES

744 P Street, Sacramento, CA 95814

(916) 445-0190



November 22, 1978

ALL-COUNTY LETTER NO. 78-50

TO: ALL COUNTY WELFARE DIRECTORS
COMMUNITY CARE LICENSING STAFF

SUBJECT: COUNTY LEGAL ACTIONS ON COMMUNITY CARE FACILITIES

REFERENCE:

County welfare departments which have contracted with the State Department of Social Services to license community care facilities assume the responsibility of handling enforcement actions as they pertain to the facilities under their jurisdiction. Counties are required to perform the investigation of complaints and pursue legal administrative remedies pursuant to California Administrative Code Title 22, Section 80149 and the California Community Care Facilities Act Section 1511, 1525, 1526, 1550, 1552 and 1553 (et seq). The Community Care Licensing contract outlines the program activities that counties are required to follow.

As a result of Department of Social Services focus on Community Care licensing enforcement, the Community Care Licensing (CCL) Branch has established a Client Protection Services (CPS) Bureau to provide enforcement support to State and county licensing staff. The CPS Bureau will assume the responsibility of providing consultation services to contracted welfare departments on actions that may require adjudication. County licensing staff should deal directly with the CPS Field Consultants whenever they require referral of legal actions.

County welfare departments should contact the CPS Field Consultant assigned to their region whenever the county assesses a need for guidance to successfully obtain a denial, suspension or revocation action. However, the county licensing staff will retain responsibility for preparing the Statement of Facts with the CPS Field Consultant being available to review case records and advise the county on the appropriate regulatory citations and evaluate the need for further development in documentation or format. The Statement of Facts format that is to be used by State and county licensing staff is attached (Attachment #1). When case findings have been completed, the CPS Field Consultant will then coordinate action with the DSS Office of Legal Affairs and maintain a direct contact with the county licensing staff to keep them apprised of case status and actions taken by the State.

County welfare departments should direct all requests for consultation services and referral of legal actions to the appropriate field consultant by using the attached County Licensing Agency Services Request form (Attachment #2). Please refer to the attached list for the name and regional office address of your assigned field consultant (Attachment #3). If you have any questions regarding this procedure, you may contact the Northern region staff at (916) 445-4756 or the Southern region staff at (213) 620-2942.

Sincerely,

A handwritten signature in dark ink, appearing to read "G. Adams", with a long, sweeping horizontal line extending to the right.

GARY ADAMS
Deputy Director
Licensing and Assessment Division

Attch.

cc: CWDA

STATEMENT OF FACTS
IN THE INVESTIGATION/INSPECTION
OF

Facility Name: _____

Facility Address: _____

Licensee Name: _____

Note: If corporation is doing business under a name other than the name of the corporation, include the DBA. Also, if corporation is a subsidiary, include the name and address of the parent corporation.

License
Number: _____ (See Exhibit A) If application only, insert the word Application).

Note: Reference should always be made at this point to Exhibit A. If facility is licensed, Exhibit A should include present license, any past licenses, application(s), and documentation supporting application(s).

If application only, Exhibit A should include application and all supporting documentation.

I. Ownership

(List all corporate officers and their addresses. List all corporate officers and their addresses of the parent corporation, if known. Supply name of agent designated for service of process if known.)

II. Classification of Facility

Designate type of license, e.g., large family home--children. Specific current limitations on license. Example: And adults 18 thru 65.

III. Allegation Preface

Use a short paragraph to summarize the more serious allegations used as the primary cause for either denial or revocation.

IV. Alleged Violations

All violations of the same regulation will be listed together in chronological order with the most recent violation listed first.

IV. Alleged Violations (continued)

Statute or Regulation	Summary of Violation
Note: Do not para- phrase. Only list section number.	Note: Every attempt should be made to state occurrences giving rise to alleged violation in succinct a manner as possible. After every summary paragraph, ask yourself the question, "How do I know?" Reference in parentheses to the appropriate exhibit and the appropriate witness by number.
<u>Example</u> Title 22: 90301	On January 22, 1976, facility evaluator (insert name) visited subject facility. A check of the records showed that board members received \$50 compensation for attendance at meetings in addition to reimbursement for travel. Subject facility is a non-profit corporation and the state has not specifically exempted the facility from the non-compensation requirement. (See, Exhibit B, Witness #1)

V. Statement of Physical Evidence in Possession

E.g.,
I.D. No. 1 -- Stained bed linens, in possession of facility evaluator, Mr. Care.

VI. List of Witnesses

Identify witnesses by number. Give name, address, telephone, and position if applicable. Identify and designate by number and include a short statement of what they will testify to. Obtain a written declaration from principal witnesses and include the declarations as exhibits.

VII. Miscellaneous

E.g.,
Diagram of facility, if applicable.

COUNTY LICENSING AGENCY SERVICES REQUEST
CLIENT PROTECTION SERVICES BUREAUInstructions

- 1) Complete this form in triplicate when you require consultation services of the Client Protection Services Bureau.
- 2) Retain the original, Client Protection Services Bureau (Community Care Licensing Branch)
send 2 copies to:
Northern Region Southern Region
744 P Street, MS 4-149 107 S. Broadway, Rm. 7014, MS 28-10
Sacramento, CA 95814 Los Angeles, CA 90012
- 3) Attach available documentation (if necessary).
- 4) All requests must be approved by the County Licensing Supervisor.

County Identification

Name of county _____ County District Office (if applicable) _____
Evaluator _____ Phone # _____
Immediate Supervisor _____ Phone # _____

Facility Problem Statement

Name of facility _____
Type of facility _____ Current capacity of facility _____
Address of facility _____ Licensed capacity of facility _____
Facility phone no. _____
Name of Licensee _____
Address (if different) _____

Brief description of the problem (give regulations or statutes violated or not met):

Service(s) Required (Circle one or more)

1. Appeal to the Denial of Application.
2. Cease and Desist Order.
3. Revocation of License
4. Consultation (describe need). _____

Signature of Supervisor

Date

COMMUNITY CARE LICENSING BRANCH - Client Protection Services Bureau Field Consultants

NORTHERN REGION

Department of Social Services
Community Care Licensing Branch
Client Protection Services Bureau
741 P Street, Mail Station 4-149
Sacramento, California 95814
(916) 445-4756

SOUTHERN REGION

Department of Social Services
Community Care Licensing Branch
Client Protection Services Bureau
107 So. Broadway, Mail Station 28-10
Los Angeles, California 90012
(213) 620-2942

District and Sub District Offices/Counties

Berkeley

Alameda, Contra Costa

San Francisco

Marin, San Francisco, San Mateo

Los Angeles

Los Angeles

Sacramento

Butte, Colusa, El Dorado, Nevada
Placer, Sacramento, Sutter, Yolo, Yuba

Fresno

Fresno, Kern, Kings, Madera,
Mariposa, Tulare

Modesto

Alpine, Amador, Calaveras, Merced,
San Joaquin, Stanislaus, Tuolumne

Redding

Glenn, Lassen, Modoc, Plumas, Shasta,
Sierra, Siskiyou, Tehama, Trinity

CPS Field Consultant

John Joseph

Sacramento

John Joseph

Sacramento

Ming Ng

Los Angeles

Norman Maulsby

Sacramento

Myra Meyer

Sacramento

Norman Maulsby

Sacramento

Norman Maulsby

Sacramento

COMMUNITY CARE LICENSING BRANCH - Client Protection Services Bureau Field Consultants

<u>District and Sub District Offices/Counties</u>	<u>CPS Field Consultant</u>	<u>Location</u>
<u>Imperial, San Diego</u>	Selma Gleason	Los Angeles
<u>San Jose</u>		
Monterey, San Benito, Santa Clara, Santa Cruz	Gary Palmer	Sacramento
<u>Santa Barbara</u>		
San Luis Obispo, Santa Barbara, Ventura	Gary Palmer	Sacramento
<u>Santa Ana</u>		
Inyo, Mono, Orange, Riverside, San Bernardino	Alwyne Cobb	Los Angeles
<u>Santa Rosa</u>		
Del Norte, Humboldt, Lake, Mendocino, Madera, Solano, Sonoma	James Phipps	Sacramento